OCCUPATIONAL THERAPY THERAPEUTIC RECREATION

AFFILIATE/INTERN MANUAL



WESTERN STATE HOSPITAL STAUNTON, VIRGINIA

2006 EDITION

STUDENT MANUAL

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REHABILITATIVE SERVICES DEPARTMENT

WESTERN STATE HOSPITAL

Statement of Philosophy

It is the purpose of the Rehabilitative Services Department to assist each patient to reach his/her optimal level of functioning. The department is concerned that all aspects of the patient be treated, be they mental, physical, emotional, spiritual or social.

A psychosocial rehabilitation treatment model (PSR) is utilized to provide the bulk of the patients' active treatment. Interventions are presented in a curriculum-based program that runs 20 hours per week. Each patient, in concert with his or her treatment team, develops an individualized schedule based on the person's discharge goal. Facilitators for the interventions are from all clinical disciplines, so ample opportunities to work as a team exist.

In broad terms, occupational therapy can be equated with: "The action or activity and the objects used in the action process function as catalytic agents or stimuli eliciting intra-psychic and interpersonal responses which in turn are used in whatever way is appropriate to patient needs and treatment orientation." (from Fidler and Fidler)

Recreation therapy embraces a definition of "health" which included not only the "absence of illness", but extends to enhancement of physical, cognitive, social and affective development so that a person may participate fully and independently as possible, in chosen life pursuits. Therapeutic recreation treatment utilizes a person's existing skills and interests as well as facilitates the establishment of new skills for daily living and community functioning.

Continuing education is viewed as important and necessary to adequate patient treatment. The importance of keeping one's skills current is vital, and staff members are encouraged to attend and give in-service education as well as participate in continuing education opportunities outside the facility.

Professional staff members are encouraged to belong to the appropriate professional organizations and to attend such meetings as appropriate.

The department is committed to provide a solid learning experience in psychiatry for professional level occupational therapy, therapeutic recreation, and certified occupational therapy assistants. A well-developed performance improvement process shall be used to search for ways to identify opportunities for change and track strategies implemented to improve care.

MEET THE STAFF

<u>DIRECTOR OF REHABILITATIVE SERVICES</u> – Michael L. Poole, OTR/L has the responsibility to supervise and coordinate the delivery of rehabilitative services at WSH. Besides occupational therapy, these services are: therapeutic recreation, pre-vocational training, and adult education. He is the fieldwork coordinator for the facility and has experience as a psychosocial therapist, and administrator. His office is in the Stribling Building and his phone is 28335. He also serves on several hospital committees.

<u>SECRETARY FOR REHAB SERVICES</u> - Linda Mader handles the mechanics of all supply ordering, correspondence, filing, and typing. She will be the one to see when you have questions about the above. She is also located in Stribling, or you may call her at 28334.

OCCUPATIONAL THERAPISTS - Edna Stone, OTR/L, and Clay Huie, OTR/L are senior therapists. Suzanne Roberts, OTR/L, Sara Snider, OT, Brenda Early, OTR/L, Jim Stevens, OTR/L, Susan Bevins, OTR/L and Susan Baizley, OT are our staff therapists. Mary Miller, COTA and Alice Webb, COTA are our COTA's.

<u>THERAPEUTIC RECREATION SPECIALISTS</u> - Sue Smiley, CTRS; Laura Edwards, CTRS; and Cathy Fulk, CTRS provide the professional leadership for therapeutic recreation programs. Sue is also the Service Chief for the Leisure Skills Development PSR service and coordinates the TR internship website. Sue, Laura and Cathy provide the clinical supervision to interns.

<u>MUSIC THERAPIST</u> – Melissa Graham, MT BC is our music therapist. She is involved in the PSR program.

<u>TEACHERS</u> - Patt Hollar and Eddie Homes provide programs to address the patient's educational needs. Programs ranging from remedial academics through GED are individually designed for each participant.

<u>VOCATIONAL EVALUATOR</u> – Sarah Snider, OTR/L and Jim Stevens, OTR/L, provide vocational evaluation services for the pre-vocational programming using a variety of standardized and non-standardized evaluations.

<u>SOCIAL SKILLS SERVICE CHIEF</u> – Cindy Caldwell is a clinical social worker assigned to Rehab Services. She is responsible to coordinate the social skills service area for the psychosocial rehab program.

<u>REHAB STAFF</u> - a group of paraprofessional folks complete our staff. These individuals are invaluable sources of information regarding how to deal with patients and what types of activities work best. You will be assigned times to observe and work with many of them.

Cindy RudinBrenda FisherDonna NultyBruce ThompsonNed SparksRay LambertCarol WilliamsNancy CoinerWinona SheetsStan FannMargaret AdcockLinda MasonBobby SmithDoug ClemmerBetty Weeks

PSR (Psychosocial Rehabilitation) TREATMENT AREAS

<u>WEBB MALL</u> – is in the Stribling Building which contains rooms used as classrooms for various PSR interventions. Special areas are: the gym, pre-vocational training areas, daily living skills areas, the library and the games room. The secure mall (Barber Mall) area is located on the second floor of the building and is utilized for patients needing a secure environment.

<u>HARVEST MALL</u> – is the PSR program serving admissions wards A-1, A-2 and B-2. It occupies space in the Pettis Building.

<u>FIRST STEP MALL</u> – is located in C Unit. It serves patients who are more cognitively impaired. Its design utilizes shorter, more frequent interventions that those found in Stribling.

<u>Deaf Program</u> – is located in the B1 unit. This space is utilized for the hearing impaired PSR program.

GENERAL POLICIES AND PROCEDURES

1. Working Hours

You will be expected to be present from 8am until 4:30 pm each weekday. Lunch is 30 minutes at mid-day. One evening (5:15 - 8:00 pm) is also required. A time card is located in the office suite, and must be used to keep track of your time. Please sign in when you come on duty and sign out when off duty. Compensatory time may be awarded when you work the evenings and other approved times such as holidays or weekends. You may be able to use the compensatory time to take a long week end on occasion, but arrangements must be made with your supervisor in advance to make sure that you are getting in the amount of time needed for successful completion of the affiliation. You may not use accumulated time to shorten your affiliation, however. See handout on compensatory time located later in this packet. TR interns will follow NCTRC guidelines.

2. Meetings

Meetings will be assigned to you once on site.

3. Appropriate Attire

Casual, professional attire is suggested. Footwear must be closed toe and secured at the heel. Jeans are acceptable but should not be badly faded, drag on thefloor, or torn. Items made of see-through material are not allowed, nor are items that would allow your underwear to be exposed. Shorts must be of a reasonable length.

4. Absences

- a. You must obtain approval to accrue compensatory time. This is time worked over your normal expected duties and can be used to extend weekends, or take time off for personal reasons. Comp time <u>may not</u> be used to shorten the affiliation.
- b. Leave time is granted for emergencies and illness. Any extended leave will require an adjustment of the original termination date or will require extra hours worked at night or on weekends. Again, supervisor must approve.
- c. If an absence should occur for reasons other than illness, arrangements must be made with your supervisor.

5. Reporting Incidents Occurring During Activities

In the event that a patient or staff is injured in any way, the staff person involved in or observing the incident must complete the appropriate form(s). Blank forms may be obtained in the rehab services office or on the wards. Specific directions and assistance in filling out the forms is available from your supervisor. **Under no circumstances should incident forms be mentioned in the patient's medical record**.

6. Professional Courtesy

- a. Please inform therapists, assistants or other treatment team members when you will be unable to attend a scheduled group. It is preferable to select a competent/qualified substitute to assume your duties in your absence as opposed to canceling the group.
- b. Check with ward staff, rehab services staff and any other person involved in appointments or activities before scheduling patients for treatment. Avoid double scheduling of patients in order to promote favorable interdisciplinary relations.

7. Clinic Maintenance

- a. All materials must be returned to the appropriate place once a group has been completed.
- b. Any equipment that is lost or damaged should be reported to your supervisor for replacement or repair. **NOTE:** areas will have specific guidelines for sharps. Familiarize yourself with them.
- c. Before leaving the clinic or area at the end of the day, all windows must be closed, coffee pots unplugged, lights and air conditioners turned off, and doors locked.

8. Use of Telephone

- a. Calls within the hospital dial 5 digit number. Example: 28334 for the office.
- b. To make a local call dial 9 to get an outside line. Once a dial tone is heard, dial the number. Example: 9-886-XXXX. Toll free numbers use 9-1-800-XXXX.
- c. If you need to make a business related long distance call, you may use the phone in the Conference Room. To access the long distance lines (which include numbers outside of the local calling area but within area code 540), you need to dial an 9 followed by a 1, the area code and the number. Example: 9-1-XXX-XXXX-XXXX. Please log all calls you make that use long distance.

d. **DO NOT ACCEPT COLLECT CALLS**

- e. Credit card calls or calls charged to another number may be made by contacting the hospital switchboard at 28000 or through 1-800-CALL-ATT.
 - f. The emergency number in the hospital is 29111.

9. Patient Records

- a. Patient records should not be removed from the ward without permission from the appropriate ward staff. They should **NEVER** be taken from hospital grounds.
 - b. All evaluations and notes must be countersigned by your supervisor.
 - c. Black ink must be used when writing in the record.
- d. Errors must be corrected by placing one line through the error and placing the first initial and last name plus OTS, TRS or OTAS by the error. Never use white out or an eraser.
- e. Assessment related data will be located in Data Base A, Assessment Section. Any item to be filed in the record should have an accompanying ID note entry. Most wards have clerks to file items in the record, so check before placing anything in the chart.

REMEMBER THAT HIPAA REGULATIONS FORBID SHARING PATIENT INFORMATION WITH UNAUTHORIZED SOURCES.

10. Holidays

The following holidays will be observed. You may wish to work one for compensatory time. If so, consult your supervisor to obtain permission and work schedule.

New Years Day

Lee/Jackson/King Day (3rd Monday in January)

Lincoln/Washington Birthday (3rd Monday in February)

Memorial Day

Fourth of July

Labor Dav

Columbus Day

Veterans Day

Thanksgiving Day

The day after Thanksgiving

Christmas Day

11. Insurance

Students must provide their own health and liability insurance. The hospital will provide for minor medical emergencies on grounds.

12. Student Supervision

Supervision will be provided on-site during some treatment sessions and weekly face-to-face meetings. Feedback will be provided on observed strengths and weaknesses and will follow the accepted TR or OT format. At mid-point and at the end of the affiliation, the supervisor and the student will go through the proper form and assign formal grades. Communication with your supervisor is the key to a productive relationship. Follow through with the advice you receive and take responsibility for your learning.

13. <u>Keys</u>

Keys will be issued upon arrival. They are the property of the hospital and must be returned at the end of the affiliation. If lost, a charge for each key will be made.

14. Safety

It is your responsibility to familiarize yourself with hospital safety regulations located in the departmental procedure manual, the hospital safety manual and the hospital instruction manual. Also, ask questions when you have them. **BE SURE TO FIND OUT ABOUT THE SPECIFIC SHARPS CONTROL PROCEDURE FOR EACH AREA!**

15. Orientation

Will begin on your first day with an overview of the hospital and the department. A photo ID badge will be provided and must be displayed while you are on duty. It will be returned to the hospital at the end of your affiliation. Specific orientation to your duties will be provided beginning the afternoon of day one. If you bring your personal vehicle, it must be registered with security. This will be done when you pick up your keys.

16. Cell Phones

As there are no in-room phones, cell phones are permitted in the dorm areas. They should not be used during patient activities. If you are expecting a phone call, have it routed into the main office during business hours.

17. NO PETS

BEHAVIORAL OBJECTIVES

NOTE: Specific behavioral objectives for each clinical discipline are available on site. In general, we like to offer the following:

<u>ENTRY LEVEL</u> The following are behaviors/abilities expected of students upon arrival at Western State:

- 1. Can demonstrate the ability to be flexible in terms of daily schedule; to be comfortable if things are not tightly structured.
- 2. Is aware of and can utilize a variety of resources for information gathering. These would include such things as ward charts, treatment team members, other personnel, etc.
- 3. Can demonstrate basic knowledge of psychiatric terminology along with psychotropic medications and side effects.
- 4. For OT: aware of different theoretical frames such as Mosey, Occupational Behavior, SI, Allen, etc. For TR: aware of five domains, Peterson & Gunn model, TR theory and practice.
 - 5. Is open to supervision and recognizes the importance of interpersonal communications.
- 6. Demonstrates a willingness to be responsible for their own learning. It takes active involvement in the program; and recognition of the fact that students must effect change in themselves.

<u>EXIT LEVEL</u> The following are behaviors/abilities expected of students by the end of their affiliation:

- 1. Be able to take initiative in data gathering, evaluation, treatment planning, interdisciplinary communications, and scheduling with a minimum of supervision.
 - 2. Demonstrates the ability to problem solve.
 - 3. Consistently selects appropriate treatment modality.
 - 4. Demonstrates competence in written and verbal communication, accurately.
- 5. Will develop and project a professional image that would include such things as self-confidence, competence, etc.
 - 6. Continue to be flexible.

DIRECTIONS TO WESTERN STATE HOSPITAL

BY CAR: Western State is located very close to the intersection of Interstates 64 (East-West) and 81 (North-South). Take the US 250 West exit (Exit 222) just north of the I81 - I64 junction. At the first traffic light, take a right. This will take you on to the hospital grounds. Consult your map to find your way to the Information Center, the Stribling Building or the Student Dorm located in the Jeffreys Building.

<u>BY PLANE:</u> The closest airport is in Weyers Cave, about 15 miles north of Staunton. Connections to various eastern cities can be arranged.

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IF YOU GET LOST OR NEED ASSISTANCE, CALL THE OFFICE AT (540) 332-8334 OR CALL THE HOSPITAL SWITCHBOARD AT (540) 332-8000.

HOUSING RULES

Western State is able to offer you clean, comfortable housing at no cost to you. Bed linens and towels are provided for you, as is a fully equipped kitchen for meal preparation. The following rules must be adhered to:

- 1. No alcoholic beverages or illegal drugs or firearms are allowed on campus or in your rooms.
- 2. No overnight visitors are allowed. Several local motels are available close to the WSH campus. Ask for special hospital business rates.
- 3. Please do your own minor housekeeping chores. Try to maintain a tidy, organized room. This will allow for easy cleaning by housekeeping staff.
- 4. Maintain the kitchen in a clean and healthful way. Always dispose of food wastes in the proper receptacle; do not allow food to rot in the refrigerator (or your room, for that matter); and be sure to clean up after yourself as others use the area.
- 5. Follow all hospital rules provided to you during an in-service on the first day of your affiliation.
 - 6. Keys to your dorm and room will be issued to you. Keep track of them.
- 7. Hospital security makes routine rounds in the building, so expect to see and/or hear them from time to time.
- 8. If you have problems with patients snooping around the building, call security at 28000 (on evenings and weekends). For emergencies, dial 29111.
- 9. Other problems should be taken to the Rehabilitative Services Office, and we will try to get them fixed.
- 10. Pay particular attention to the 15 MPH speed limit on campus. Also always pull in to park; do not back into spaces. Observe all stop signs, yield signs, no parking areas and one way signs.

STUDENT EXPECTATIONS/ASSIGNMENTS

- 1) An evening per week (5:15 8:00 pm) will be required. Each affiliate may be allowed to: a) flex in at noon on the assigned day or, b) accrue comp time to be used for long weekends, with supervisor's approval (NOTE: if you choose to take long week ends, it will be important not to always schedule the same day off each time you take one). Evenings may be traded, if desired, among other affiliates. This experience will allow for exposure to a wide variety of patients in a leisure time context.
- 2) A case study, typed and/or written will be required as scheduled by your supervisor.
- 3) A presentation to rehab staff will be required. This presentation can be either a modality, theory, or area of special interest; not necessarily a modality used here already; or a an OT/TR theory. You choose. Also, students may work in pairs on this (when possible).
- 4) Evaluations, using approved WSH forms or other approved evals, will be assigned by the supervisor according to the areas of major responsibility. There will be opportunities to assess acute admissions, as well as chronic patients. and to use specific living skill evals. The total number of evals will vary for each affiliate, depending on availability of patients and student's needs.
- 5) There will be specific groups assigned in which the student will assist regular staff in the planning and conducting of the groups; by week seven, the roles should be able to be reversed. There will also be a need for the student to develop a new group(s) based on patient needs. This can conceivably continue after the student leaves.
- 6) Documentation tasks will be assigned once you are on-site. These may consist of narrative notes, evaluation scales or other forms of written work.
- 7) Communication between affiliates and supervisors is a must. If you have a problem/concern, the proper way to handle it is to take it to your supervisor. Discussion of individual problems should not be shared with others. You will have formal times to talk with your supervisor as well as the availability of the supervisor or department head as needed. **DON'T LET A PROBLEM BE OVER A DAY OLD.**
- 8) Special projects may be assigned as needed. These could include such things as assisting in designing new policies/procedures, or something else equally exciting.
- 9) Students are expected to participate, in a meaningful, professional manner, in scheduled team or staff meetings. Behaviors will be assessed by observation and self-report.
- 10) Nothing is written in stone; we are here to not only teach and see that required work is done, but we want to learn from you and get to know you. The key will be an open mind and a willingness to be flexible.

POLICY REGARDING WORK TIME AND ABSENCES

BACKGROUND: Development as a professional includes demonstrating responsible work time management. As Western State Hospital is typical of most work situations regarding the accrual and use of time, the intent is to provide the affiliate practice in using a system of time management similar to what will be found in the "real world." Supervisors and affiliates are expected to adhere to the policies and procedures outlined below and will be held accountable for this adherence.

PURPOSE: To establish uniform procedures regarding the work hours and time away from the work site while on affiliation. The policies are consistent with personnel policies for regular employees and will help the affiliate formulate a professional approach to time management.

POLICY: Normal work hours for affiliates are 8am to 4:30 pm, Monday through Friday for the number of weeks you are assigned. One evening per week will be required; weekend or holiday work may be required by supervision or may be requested by the affiliate. Assigned/approved time in excess of eight hours a day will be compensated hour for hour. The operative word here is "approved." Be sure to get permission if you wish to work over or take off.

PROCEDURE:

- A. Time cards are provided for each affiliate and are kept at the sign-in station next to the secretary's office in the Stribling Building.
- B. Affiliates must sign in each workday morning at the beginning of shift, and sign out at the end of shift.
- C. The work site does not include the affiliate's home or room. Therefore, regular work hours may not be spent there. Homework may be required, but this is not considered compensatory time.
- D. If time is worked other than normal hours, entries on the time card will reflect the actual time worked, with those entries made at the beginning and end of the time worked.
- E. Time cards must be signed by the affiliate to verify that the information on the cards is correct. These are legal documents which become a part of the affiliate's permanent record. This information may be needed by the school, the AOTA, NCTRC or insurance companies (in case of accident).

POLICY: Compensatory time will be awarded for hours worked beyond the normal schedule.

PROCEDURE:

- A. All approved time worked beyond the hours of 8 to 4:30, Monday through Friday, will be compensated at the rate of one hour off for each hour worked.
- 1. Affiliates are expected to engage in patient-related activities when working additional hours. It is not permissible to do written work during these hours unless it is required as part of the specific assignment.
- B. Time may be assigned by the supervisor or the affiliated may request to work additional time.

C. Compensatory time will be kept by the timekeeper on the time card, and can be accumulated at a maximum rate of sixteen hours per month.

POLICY: Time away from the work site is allowed during the affiliation.

PROCEDURE:

- A. A maximum of three work days is allowed in case of personal illness of family emergency. The supervisor must be notified in a timely manner if this time is needed. If more than three days is used, the time will need to be made up by working additional hours, or extending the termination date of the affiliation.
- B. Compensatory time may be used by submitting WSH Form 600 to the supervisor for approval. The date(s) and time(s) of the requested absence must be stated on the form.
- C. Any time spent visiting other facilities is considered to be work time. Time still must be accounted for by signing in and out on the time card.
- D. Supervisors have the right to disapprove requests to work additional hours or to take time off, if it is deemed in the best interest of the affiliate. Each affiliate's time will be handled on an individual basis and is confidential information.

JOB ESSENTIALS:

Performing the essential functions of this affiliation requires: repetitious walking, sitting and/or standing as part of the routine. Visual acuity to observe and report changes in patients' behaviors on a continuous basis; bending, lifting and reaching overhead to position, restrain, transfer, transport or escort patients and to assist patients to perform activities. Manual dexterity sufficient to write assessments, notes and summaries – or sufficient to operate a personal computer.